

2841
JFW**In the United States Patent And Trademark Office**

Application Number: 10/004,964
Application Filed: 12/04/2001
Applicants: Joanna Margaret Williams, and
Darin Scot Williams
Customer Number: 27048
Title: Autonomous Ear-plug Alarm With Separate Setting Device
Examiner: Thanh S. Phan
(571) 272-2109

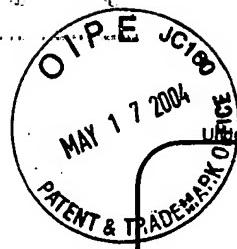
Amendment A

Commissioner for patents
P.O. Box 1450
Alexandria, VA 22313-1450

Mr. Phan,

In response to the Office action mailed 02/20/2004 please amend the above application as follows:

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

		Application Number	101004,964
		Filing Date	12-04-2001
		First Named Inventor	Joanna, Margaret Williams
		Art Unit	2841
		Examiner Name	Thanh S. Phan
Total Number of Pages in This Submission		Attorney Docket Number	

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Darin Williams	
Signature		
Date	5-12-2004	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Darin Williams	
Signature		Date 5-13-2004

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